



USAID
FROM THE AMERICAN PEOPLE

TB CARE I

TB CARE I - Zambia

**Year 2
Quarterly Report
April-June 2012**

July 30, 2012

Quarterly Overview

| | |
|-------------------------------|---------------------------|
| Reporting Country | Zambia |
| Lead Partner | FHI360 |
| Collaborating Partners | KNCV, MSH, WHO |
| Date Report Sent | |
| From | Seraphine Kaminsa Kabanje |
| To | George Sinyangwe |
| Reporting Period | April-June 2012 |

| Technical Areas | % Completion |
|-------------------------------------|---------------------|
| 1. Universal and Early Access | 23% |
| 2. Laboratories | 65% |
| 3. Infection Control | 67% |
| 4. PMDT | 67% |
| 5. TB/HIV | 79% |
| 6. Health Systems Strengthening | 88% |
| 7. M&E, OR and Surveillance | 71% |
| 8. Drug supply and management | 63% |
| Overall work plan completion | 65% |

Most Significant Achievements

TB CARE I hired two new technical staff and is sharing staff time for a Program Officer to support project activities. The staff includes a Senior Research Advisor - Dr. Margaret Kasaro, a Senior Program Advisor - Dr. Henry Phiri and a Program Officer- Paul Sichalwe. Dr. Kasaro will support the TB CARE I project and NTP efforts in scaling up the operational research agenda and Dr. Phiri will oversee the TB/HIV collaborative activities, including the anticipated PEPFAR funded 3 Is project implementation. The National TB Control Program (NTP) and TB CARE I partners held a joint year three planning meeting with representatives from the national TB reference laboratory and from the target provinces from June 28-29, 2012. This meeting provided significant information to input in the project focus areas of the year three workplan currently under development. Participants included TB/HIV/Leprosy Coordinators, Biomedical Scientists and Communicable Diseases Control Specialists. The FHI360 Senior Scientist/TB CARE I board member - Dr. Carol Dukes Hamilton was on mission in Zambia during this period and made a presentation on MDR-TB at the meeting. The project has also been able to identify activities for reprogramming of funds to support more activities not previously planned for this year. These include support to more community level trainings for volunteers in DOTS and infection control, and procurement of supplementary commodities and laboratory equipment. The project also prepared a workplan for the national prevalence survey, following finalization of the survey protocol this quarter and reached an agreement with the NTP to reprogram the funds previously allocated for procurement of TB drugs, to procure more key equipment for the prevalence survey and transport support for PMDT support.

Universal Access: The Patient Centered Approach (PCA) protocol was submitted to the ethics research committee for approval and comments were received from the ethics committee. Approval was provided on June 29, 2012. Activities will begin in August with adaptation of tools by the core team, from August 13-15, 2012 and a stakeholders meeting planned for August 16 in North Western province. TB CARE I also supported training in TB DOTS for 30 health care workers (19 females and 11 males) from Central province, from May 6-12, 2012.

Laboratories: 43 laboratory staff (12 females and 31 males) from all target provinces were trained in the new diagnostic tool of LED based microscopy. TB CARE I also continued to provide EQA support to 112 facilities including 48 health center level diagnostic facilities and 44 district level diagnostic facilities in the six supported provinces. TB CARE I also provided training support in laboratory biosafety and biosecurity for 15 laboratory staff (3 females, 12 males) from June 3-8, 2012.

TB CARE I procured two Xpert MTB/RIF machines for placement at two points of care laboratories in the Central and Copperbelt provinces. Discussions have been underway this quarter for a task force for GeneXpert scale-up to be in place by July 2012. Dr. Grace Kahenya, representing MSH under TB CARE I, is providing technical leadership in this process.

TB IC: TB CARE I has supported the integration of TB IC into facility level plans in six facilities this quarter. TB CARE I also provided support for regional training of 2 MoH staff in TB IC in Pretoria, South Africa. One of the trained staff members is the District Community Partnership Coordinator in Ndola district. She participated as a trainer in the community IC training of the TB CARE I supported Ndola District TB IC demonstration project. The other staff member is the TB/HIV/Leprosy coordinator for the Central province where TB CARE I anticipates to support IC activities during implementation of the 3 Is project. The project continues to support implementation of the Ndola District TB IC demonstration project this quarter. A team of KNCV TB IC Advisor, Dr. Max Meis, TB IC consultant-Ms. Anna Maruta, FHI360 project staff and PMO/DMO staff evaluated compliance with IC work practices (project intervention 5) following the finalization of costed facility implementation plans (project intervention 4) in the last quarter. The plans were signed off by the facility administrators and endorsed by the DMO. Relevant activities are now merged into the 2012-2013 district implementation plans. Dr. Ed Nardell (PIH) introduced the FAST strategy (project intervention 6) to the Director of Public Health & Research and the NTP, as well as to key staff of the DMO and the health facilities with a team of consultants, Ms. Suzanne Essama-Bibi (FHI360), Ms. Elizabeth Berera (PIH) and Dr. Victor Ombeka (KNCV). Two sites were provisionally identified for piloting the FAST strategy.

PMDT: KNCV consultants' Dr. Victor Ombeka and Dr. Amos Kutwa provided technical assistance to the NTP on PMDT in May, 2012. The two reviewed national guidelines prepared SOPs and made field visits to the two facilities providing in-patient care for MDR-TB patients. This mission has provided more information to the NTP to support PMDT scale-up.

TB HIV: TB CARE I provided support to three district level TB /HIV coordinating body meetings held in Kitwe district in the Copperbelt province, Kasama district in Northern province and Mungwi in Muchinga province. TB CARE I also provided support to training of 22 HIV Adherence Support Workers (10 females and 12 males) who are providing community level support to HIV infected persons in Northern province, under the PEPFAR funded ZPCT II project. TB CARE I is supporting enhancing TB knowledge in these community volunteers in all the ZPCT II target provinces as part of the collaborative efforts to control TB in HIV settings. The training in Northern province was held from April 9-13, 2012. 10 females and 12 males were trained. TB CARE I and ZPCT II received technical support from the TB/HIV Technical Advisor - Ms. Suzanne Bibi-Essama, from April 23-27, 2012. She conducted an internal technical quality review of the TB CARE I project with the M&E and technical project staff. She also participated in the TB IC demonstration project intervention on the FAST strategy.

Health System Strengthening: TB CARE I supported the National annual data review meeting held from May 20-24, 2012. The meeting was well attended by TB/HIV/Leprosy coordinators and communicable diseases control specialists from all nine provinces. Also present were partners supporting the MoH for TB and HIV activities including WHO, UNDP, UNAIDS, CHAZ, CIDRZ, CDC.

CDC.

M&E, Operational Research (OR) and Surveillance: TB CARE I provided technical and logistical support during the provincial data review meetings held by the Copperbelt, North Western, Central and Luapula provinces. Dr. Mwendaweli Maboshe provided technical support to the provinces during these meetings. For OR, a startup national level training was conducted from April 17-20, 2012. Dr. Lisa Dulli, an FHI360 Scientist was the lead facilitator, with the NTP Manager-Dr. Nathan Kapata, Dr. Pascalina Chanda-Kapata-National Research Coordinator and Dr. Seraphine Kaminsa Kabanje -TB CARE I Project Director, as co-facilitators. The participants developed consensus around high priority research concepts that will be fully developed in a second workshop planned for August 20-24, 2012. A Senior Research Advisor has been hired through FHI360 to support TB CARE I OR agenda and other FHI360 research projects in the country.

Overall work plan implementation status

TB CARE I partners have accelerated implementation of the workplan activities. Agreement was made by TB CARE I partners to establish specific dates with the NTP, NRL and target provinces for implementation of the activities. An implementation calendar for all major workplan activities is available and these dates are being adhered to.

Technical and administrative challenges

The project was anticipating hiring two new drivers this quarter, following procurement of two new vehicles. However, with the hiring process, the two drivers' will only start work in the next quarter, in July 2012. With the new hires, TB CARE I will have completed the hiring of new staff members who were planned for in the workplan for this year. The project plans to hire more staff members that will be included in the year three workplan to supplement current staff efforts to effectively implement activities that are now expanded to focused facility level support, including activities in TB/HIV, TB IC, PMDT and laboratory support. The project has also planned to support to hire NTP staff at national level during year three.

In-country Global Fund status and update

A presentation was made by a UNDP representative during the national data review meeting on the current support being provided by the Global Fund for procurement of anti-TB drugs. A proposal has been submitted by the NTP through the Transitional Funding Mechanism (TFM).

Quarterly Technical Outcome Report

| Technical Area | 1. Universal and Early Access | | | | | | | |
|---|--|----------|------|--------|------|--------|---|---|
| Expected Outcomes | Outcome Indicators | Baseline | | Target | | Result | Highlights of the Quarter | Challenges and Next Steps to Reach the Target |
| | | Data | Year | Data | Year | Y2 | | |
| 1.1 Increased demand for and use of high quality TB services and improve the satisfaction with TB services provided (Population/Patient Centered) | 1.1.3 Patients’ Charter is implemented Indicator Value: Score (0-3) based on definition | 0 | 2011 | 2 | 2012 | 0 | PCA protocol was developed , submitted, and reviewed by the research ethics committee this quarter. Approval letter was written on June 29, 2012 and delivered early July. | TB CARE I received the approval dated June 29, 2012 in July. A stakeholders' meeting is planned for August 16, 2012. Adaptation of the tools is planned for the same week, from August 13-15, 2012. |
| 1.2 Increased quality of TB services delivered among all care providers (Supply) | 1.2.1 Appropriate tools from the PPM Toolkit is implemented Indicator Value: Score (0-3) based definition disaggregated by the tools selected by NTP. | 0 | 2011 | 2 | 2012 | 0 | The NTP and TB CARE I will review the PPM toolkit and advise on implementation of tools from the toolkit. A situational analysis planned from year one of the project implementation, will be conducted once dates are agreed upon with NTP next quarter. | The NTP does not have a dedicated staff member for the PPM but is coordinating the PPM activities among the current NTP staff. |
| | 1.2.5 Private providers referring suspects to government facilities Indicator Value: Number Level: Score (Yes/No) Source: TB register Means of Verification: Numerator: Denominator: | Yes | 2011 | Yes | 2012 | Yes | The private providers have not yet been provided with the tools for this activity. | The reporting and recording tools will be introduced to all the private health care providers in the supported provinces during the fourth quarter of project implementation. |

| Technical Area | 2. Laboratories | | | | | | | |
|---|---|------------------------------|------|--------|------|-----------------------------------|---|---|
| Expected Outcomes | Outcome Indicators | Baseline | | Target | | Result | Highlights of the Quarter | Challenges and Next Steps to Reach the Target |
| | | Data | Year | Data | Year | Y2 | | |
| 2.1 Ensured capacity, availability and quality of laboratory testing in country needed to support the diagnosis and monitoring of TB patients | 2.1.2 Laboratories with working internal and external quality assurance programs for tests that they provide including: a) smear microscopy, b) culture, c) DST, and d) rapid molecular test Indicator Value: Percent Numerator: Number of laboratories enrolled in EQA program meeting description above both nationwide and TB CARE areas. Denominator: All laboratories (national and TB CARE areas separately) that perform one or more of the above TB diagnostics. | 64% (national) 136/213 | 2011 | | 2012 | The annual data not yet available | An implementation plan was developed with dates agreed upon with the MoH, national reference laboratory for implementation of all planned activities. a)TB CARE I continued to provide EQA support to 112 facilities including health center level diagnostic facilities in the six supported provinces. b)Training of 43 laboratory staff in LED microscopy from all target provinces has provided laboratory staff to make TB diagnosis with a more sensitive microscope. Local training of 15 laboratory staff in biosafety and biosecurity this quarter has also provided laboratory staff with more insight into their laboratory biosafety needs. c) Action plans were developed and dates set for the baseline assessment of the TB specimen referral system and smear preparation/fixation in non-diagnostic sites. | Scale-up of EQA visits from 44 to 112 laboratories has influenced the indicator that shows how many laboratories are performing more than 95% correct microscopy, with a decline to 75% this quarter. Refresher training in microscopy for the staff in the health center level laboratories in all target provinces will be planned for in the next quarter, and in the annual workplan for APA3. Follow-up visits will be conducted as needed for facilities with false smear results following EQA. Further training is planned in biosafety skills from July 10-14, 2012 and LED microscopy training from September 3-6, 2012. The baseline assessment of the TB specimen referral system will be conducted from July 23 to August 13, 2012 in four selected provinces, the Copperbelt, Central, Northern and Eastern provinces. The training of health care workers (from non-diagnostic sites) in smear preparation and fixation will be conducted from September 10-14, 2012 |
| 2.2 Ensured the availability and quality of technical assistance and services | 2.2.2 SRLs that are meeting the terms of reference including conducting technical assistance visits and providing proficiency testing panels Indicator Value: Number of SRLs | 1 | 2011 | 1 | 2012 | 1 | Planning meetings have been held by TB CARE I laboratory staff with the NRL. Dr. Grace Kahenya (MSH) has worked with Robertson Chibumbya (FHI360) and Mweemba Muvwimi (CDL lab head) to facilitate planning for the availability of quality technical services at the NRL. | Dr. Valentina Anisimova will provide technical assistance in the development of culture EQA guidelines and training of laboratory staff in TB laboratory management next quarter September 18-22, 2012. |

| | | | | | | | | |
|--|--|---|------|---|------|---|---|---|
| 2.3 Ensured optimal use of new approaches to the laboratory confirmation of TB and incorporation in national strategic lab plans | <p>2.3.1 New technologies have been introduced</p> <p>Indicator Value: Number for each technique below by Central, Provincial, district and Peripheral levels</p> <ol style="list-style-type: none"> 1. TB culture 2. First line DST 3. Second-line DST 4. HAIN MTBDRplus 5. GeneXpert 6. LED microscopy | <p>TB culture (6)</p> <p>First line DST (6)</p> <p>Second-line DST (1) HAIN MTBDRplus (2)</p> <p>GeneXpert (1)</p> <p>LED microscopy (12)</p> | 2011 | <p>TB culture (6)</p> <p>First line DST (6)</p> <p>Second-line DST (1) HAIN MTBDRplus (3)</p> <p>GeneXpert (3)</p> <p>LED microscopy (20)</p> | 2012 | <p>TB culture (6)</p> <p>First line DST (6)</p> <p>Second-line DST (1) HAIN MTBDRplus (2)</p> <p>GeneXpert (1)</p> <p>LED microscopy (12)</p> | The evaluation of the GeneXpert at the Chest Disease Laboratory has been completed. The final report will be produced in July, 2012 | Challenge: Implementation of the GeneXpert has been slow. Discussions have been held with the NTP to come up with a task force to spearhead the implementation process. Two Xpert MTB/RIF machines have been procured, waiting for placement and training of facility staff in the use and maintenance of the equipment. A laboratory consultant from KNCV, Manuela Rehr will provide technical support for this process. |
|--|--|---|------|---|------|---|---|---|

| Technical Area | 3. Infection Control | | | | | | | |
|--|--|----------|------|--------|------|------------------------------|--|---|
| Expected Outcomes | Outcome Indicators | Baseline | | Target | | Result | Highlights of the Quarter | Challenges and Next Steps to Reach the Target |
| | | Data | Year | Data | Year | Y1 | | |
| 3.2 Scaled-up implementation of TB-IC strategies | 3.2.2 Key facilities with IC focal person, implementation plan, budget, and monitoring system Indicator Value: Percent Numerator: The number of selected categories of key facilities with all three (a+b+c) interventions in place. Denominator: Total number of key facilities of the selected categories | 30% | 2011 | 100% | 2012 | 50% (5 out of 10 facilities) | TB CARE I has supported the integration of TB IC into facility level plans at the following 6 facilities. 156 health workers (61 females, 95 males) received IC orientation and training from the following district facilities: Kabompo District Hospital - 21 staff trained (13 females, 8 males), Mwinilunga District Hospital - 35 staff trained (7 females, 18 males), Mukinge Mission Hospital - 25 staff trained (13 females, 12 males), Samfya District Hospital - 25 staff (10 females, 15 males), Saint Paul’s Mission Hospital - 26 staff trained (8 females, 18 males), Kawambwa District Hospital - 24 staff (10 females, 14 males), Kabompo District Hospital - 21 trained (13 females, 8 males) | TB IC orientation meetings are planned to take place in more facilities in Northern, Muchinga and Central provinces during the fourth quarter of project implementation, from July 9-20, 2012, July 9-20, 2012 and August 2012, respectively. |

| | | | | | | | | |
|---|--|-----|------|-----|------|-----|---|--|
| 3.3 Strengthened TB IC Monitoring & Measurement | 3.3.1 Annual reporting on TB disease (all forms) among HCWs is available as part of the national R&R system Indicator Value: Yes/No | No | 2011 | Yes | 2012 | No | Annual reporting on TB disease among health care workers is not part of the current NTP reporting system. | TB CARE I will learn from the Ndola District TB IC demonstration project and support the development of reporting tools to be part of the reporting and recording system, if protocol approval is provided by the ethics committee |
| 3.4 Improved TB-IC human resources | 3.4.1 A team of trained trainers in TB IC is available Indicator Value: Yes/No | Yes | 2011 | Yes | 2012 | Yes | One IC trainer from the Copperbelt province and one TB/HIV/Leprosy coordinator, also trained in IC from Central Province, were sent to regional TB IC training in Pretoria, South Africa in June 2012 | TB CARE I will support another training on PMDT in Rwanda during quarter 4. |

| Technical Area 4. PMDT | | | | | | | | |
|---------------------------------------|--|------------------------|------|--------|------|------------------------|--|---|
| Expected Outcomes | Outcome Indicators | Baseline | | Target | | Result | St' Paul's Mission Hospital, 26 trained(8 female, 18 male) Kawambwa District , 24 (10 female, 14 male) | Challenges and Next Steps to Reach the Target |
| | | Data | Year | Data | Year | Y2 | | |
| 4.1 Improved treatment success of MDR | 4.1.2 MDR TB patients who are still on treatment and have a sputum culture conversion 6 months after starting MDR-TB treatment Indicator Value: Percent Numerator: Number of MDR TB patients in a cohort who are still on treatment and had culture conversion latest at month 6 (having had 2 negative sputum cultures taken one month apart and remained culture negative since) Denominator: Total number of MDR patients who started treatment in the cohort. | Not yet available | 2011 | | 2012 | Data not yet available | Following initial assessment of two MDR-TB renovation sites, an architectural company was engaged to prepare the renovation drawings. Drawings have been completed and tender is underway for one of the sites following required approval by the Zambia Public Procurement Authority(ZPPA). TB CARE I is also renovating five other facilities. Tender documents were prepared this quarter for these TB IC related renovation works. | Renovation works at the two MDR-TB facilities will begin following selection of a contractor . |
| | 4.1.4 MDR TB patients who have completed the full course of MDR TB treatment regimen and have a negative sputum culture Indicator Value: Percentage Numerator: Number of MDR TB patients in a cohort who completed a course of MDR treatment and who fit the WHO criteria for cure or completed treatment Denominator: Total number of MDR patients who started treatment in the cohort | data not yet available | 2011 | | 2012 | Data not yet available | Two KNCV consultants were able to review the national guidelines and develop SOPs. The reporting tools were also submitted by NTP to WHO for printing with TB CARE I support. | Reporting tools for MDR-TB will be printed in the next quarter with TB CARE I support. The NTP will conduct a data reconstruction process to determine the number of MDR TB patients who started treatment. |

| Technical Area | 5. TB/HIV | | | | | | | |
|---|---|----------|------|--------|------|--------|---|--|
| Expected Outcomes | Outcome Indicators | Baseline | | Target | | Result | Highlights of the Quarter | Challenges and Next Steps to Reach the Target |
| | | Data | Year | Data | Year | Y2 | | |
| 5.2 Improved diagnosis of TB/HIV co-infection | 5.2.2 TB patients with known HIV status Indicator Value: Percent Numerator: Total number of all TB patients registered over a given time period who were tested for HIV (after giving consent) during their TB treatment Denominator: Total number of TB patients registered over the same given time period. | 83 | 2011 | 85 | 2012 | 83 | TB CARE I provided support to three district TB /HIV meetings. Kitwe on the Copperbelt province, Kasama in Northern province and Mungwi in Muchinga province. These meetings provide a forum for TB and HIV program representatives to review and agree on TB and HIV patient care. | The project plans to support more meetings in Mufulira, Ndola and Kitwe districts next quarter. |
| | 5.2.3 TB patients who are HIV positive Indicator Value: Percent Numerator: Total number of all TB patients registered over a given time period who test HIV-positive (after giving consent) during their TB treatment Denominator: Total number of TB patients registered over the same given time period who are tested for HIV (after giving consent). | 65 | 2011 | | 2012 | 65 | The project did not implement any activities in this area this quarter. | TB CARE I will provide training in provider initiated testing and counseling (PITC) for health care workers in Mansa, Solwezi and Kabwe in the next quarter. |

| | | | | | | | | |
|--|---|----|------|--|------|----|--|---|
| | 5.2.4 Suspected TB patients screened for HIV Indicator Value: Percent Numerator: Total number of all TB suspects registered over a given time period tested for HIV (after giving consent). Denominator: Total number of TB suspects registered over the same given time period. | 78 | 2011 | | 2012 | 83 | 22 community health workers working with HIV infected clients were trained in TB case finding in Northern province from April 9-13, 2012. There were 10 females and 12 males trained | HIV community adherence support workers will be trained in Luapula in Mansa district next quarter. Trainings are also planned for Central and North Western provinces next quarter. |
|--|---|----|------|--|------|----|--|---|

Technical Area 6. Health Systems Strengthening

| Expected Outcomes | Outcome Indicators | Baseline | | Target | | Result | Highlights of the Quarter | Challenges and Next Steps to Reach the Target |
|---|--|----------|------|--------|------|--|---|--|
| | | Data | Year | Data | Year | Y2 | | |
| 6.2 TB control components (drug supply and management, laboratories, community care, HRD and M&E) formed integral part of national plans, strategies and service delivery of these components | 6.2.3 People trained using TB CARE funds Indicator Value: Number of people Numerator: Number of people trained disaggregated by gender and type of training. | 115 | 2011 | 656 | 2012 | 492 people have been trained to date. (cumulative number trained as of last quarter) | 30 health care workers were trained in TB DOTS in Kabwe District (19 females, 11 males). 43 laboratory staff were trained in LED microscopy from all target provinces (12 females, 31 males). 15 laboratory staff were trained in biosafety and biosecurity (3 females, 12 males). 2 MoH staff were trained in a regional training TB Infection Control in Pretoria, South Africa (1 female, 1 male). 22 community health workers were trained in TB DOTS in Northern province (10 females, 12 males) | TB CARE I will support more trainings in the next quarter, including laboratory one LED microscopy training, one biosafety and biosecurity training, one PMDT training and three PITC trainings. |

Technical Area 7. M&E, OR and Surveillance










| Expected Outcomes | Outcome Indicators | Baseline | | Target | | Result | Highlights of the Quarter | Challenges and Next Steps to Reach the Target |
|----------------------------------|---|----------|------|--------|------|--------|--|---|
| | | Data | Year | Data | Year | Y1 | | |
| 7.1 Strengthened TB surveillance | 7.1.2 Diagnosed cases captured by routine surveillance system Indicator Value: Percent Numerator: Number of cases in the routine surveillance system Denominator: Total number of cases in the routine surveillance system including laboratory and clinical diagnostic registers including in private sector. | 73 | 2011 | 85 | 2012 | 91 | TB CARE I supported the NTP to hold a national annual TB/HIV/Leprosy data review meeting from May 20-24, 2012. The meeting was well attended by TB/HIV/Leprosy coordinators, laboratory scientists and communicable diseases control specialists from all nine provinces. Also present were partners supporting the MoH for TB and HIV activities including WHO, UNDP, UNAIDS, CHAZ, CIDRZ, CDC. | TB CARE will continue to support the NTP's surveillance system with quarterly provincial level data review meetings |








| | | | | | | | | |
|--|---|------|------|-----|------|------|---|--|
| 7.2 Improved capacity of NTPs to analyze and use quality data for management of the TB program | 7.2.3 A data quality audit at central level has been conducted within the last 6 months Indicator Value: Yes/No | Yes | 2011 | Yes | 2012 | None | TB CARE I provided support to TB focal persons in data review and data management during the data review meetings held by all provinces this quarter. Dr. Mwendaweli Maboshe was in attendance at these meetings held in Kabwe, Central province and Ndola, Central province in May 2012. | The NTP did not conduct a data quality audit this quarter. |
| 7.3 Improved capacity of NTPs to perform operational research | 7.3.2 Number of staff trained in proposal writing Description: Indicator Value:number Numerator: number of staff trained in operational research | None | 2011 | 20 | 2012 | None | A start up national level training on operational research was conducted from April 17-20, 2012. Dr. Lisa Dulli FHI360 Scientist was the lead facilitator, with the NTP Manager-Dr. Nathan Kapata, Dr. Pascalina Chanda-Kapata and Dr. Seraphine Kaminsa Kabanje as co-facilitators. | The workshop team developed consensus around high priority research concepts to be fully developed in a second workshop that will be held from August 20-24, 2012. A Senior Research Advisor has been hired through FHI360 to support TB CARE I OR agenda and other FHI360 research projects in the country. |







Technical Area 8. Drug supply and management









| Expected Outcomes | Outcome Indicators | Baseline | | Target | | Result | Highlights of the Quarter | Challenges and Next Steps to Reach the Target |
|--|---|-----------------|------|-----------------|------|---|--|---|
| | | Data | Year | Data | Year | Y2 | | |
| 8.1 Ensured nationwide systems for a sustainable supply of anti-TB drugs | 8.1.1 Quarterly national stock information available Indicator Value: Number (as months of stock for FLDs and SLDs separately) | 12 months (FLD) | 2011 | 12 months (FLD) | 2012 | Will be provided as annual data in the fourth quarter | The NTP informed TB CARE I and the mission that they have received enough drug stocks of FLDs. Drugs have been procured through the UNPD Global Fund mechanism | The NTP and TB CARE I identified alternative activities for funding support, for the funding that was made available through USAID, PEPFAR funds. |








Quarterly Activity Plan Report





| 1. Universal and Early Access | | | Activity Leader | Approved Budget | Cumulative Completion | Planned Completion | | Cumulative Progress and Deliverables up-to-date |
|--|------------|---|-----------------|-----------------|--|--------------------|------|--|
| Outcome | Activity # | Activity | | | | Month | Year | |
| 1.1 Increased demand for and use of high quality TB services and improve the satisfaction with TB services provided (Population/Patient Centered Approach) | 1.1.1 | Orient stakeholders on the patient centered approach | FHI 360 | 3,248 |  50% | Jun | 2012 | PCA protocol was developed, submitted, and reviewed by the research ethics committee this quarter. Approval was made on June 29, 2012. |
| | 1.1.2 | Conduct data collection and analysis on adapted tools | FHI 360 | 30,507 |  50% | Jun | 2012 | Baseline data collection will be conducted following the orientation of stakeholders in the fourth quarter of project implementation. The PCA protocol was submitted together with the tools. |
| | 1.1.3 | Supervise data analysis | FHI 360 | |  0% | Sep | 2012 | Data analysis will be conducted following baseline and endline data collection. This will be done from the fourth quarter. |
| | 1.1.4 | Participate in patient centered approach regional workshop | FHI 360 | 4,417 |  0% | Sept. | 2012 | TB CARE I will participate in this workshop following the end of the implementation of all activities. It is anticipated that activities will be completed in December, 2012. |
| Outcome | Activity # | Activity | Activity Leader | Approved Budget | Cumulative Completion | Month | Year | Cumulative Progress and Deliverables up-to-date |
| 1.2 Increased quality of TB services delivered among all care providers (Supply) | 1.2.1 | Support enhanced management of pediatric TB | WHO | 11,300 |  25% | Mar | 2012 | Pediatric guidelines updated as a section of the revised national TB manual and awaiting printing. Orientation and training to follow after printing. |
| | 1.2.2 | Provide private practitioners with TB surveillance tools | WHO | 11,300 |  25% | Sep | 2012 | Preparations for PPM survey has reached advanced stage. Consultants have done an inventory of private facilities to participate in the survey. Tools finalized and due for printing. Activity to be conducted between August-September, 2012. |
| | 1.2.3 | Support orientation of private practitioners in data management | WHO | 23,391 |  0% | Sep | 2012 | Activity awaiting a survey on PPM that is planned for next quarter |
| | 1.2.4 | Support CB-DOTS program | FHI 360 | 3,897 |  100% | Mar | 2012 | Cooler boxes for 100 facilities have been procured for use by community volunteers to support intensified case finding efforts in the catchment areas and they will be distributed to all provinces. TB CARE I will support ICF efforts in all target provinces. |
| | 1.2.5 | Provide technical support to NTP in program management | KNCV | 74,093 |  0% | Jun | 2012 | The Mission is scheduled for the next quarter and agreements have been made with Dr. Netty Kamp for ACSM support. |




| | | | | | | | | |
|--|---------------|---|---------|---------|--|-------|------|--|
| | 1.2.6 | Develop ACSM strategy | WHO | 63,031 |  25% | | | Email communication has been made this quarter between the consultant, Dr. Netty Kamp, and the national coordinator, Ms. Rose Masilani to agree on implementation timelines. Discussion meetings have also been held with TB CARE I and the national coordinator. ACSM implementation will start next quarter. |
| | 1.2.7 | Enhance community participation in ACSM | FHI 360 | 29,747 |  0% | Sept. | 2012 | Activities under ACSM are planned for from the fourth quarter of project implementation. |
| | 1.2.8 | Re-orientation of health care workers in TB control | WHO | 120,721 |  75% | | | Orientations have been conducted for Central province this quarter. 30 health care workers were trained in TB DOTS (19 female and 11 male) from Central province, from May 6 - 12 , 2012. |
| | 1.2.9 | Training of HCW in ACSM | FHI 360 | 22,025 |  0% | Sept. | 2012 | Training of health care workers is planned for from the fourth quarter of project implementation. |
| | 1.2.10 | Situational analysis on ACSM | FHI 360 | 13,379 |  0% | Sep | 2012 | The situational analysis will be conducted in the fourth quarter of project implementation. |
| | 1.2.11 | ACSM operational plan development | FHI 360 | 8,508 |  0% | Sep | 2012 | The operational plan will be developed after the situational analysis is conducted. |
| | | | | |  23% | | | |





| 2. Laboratories | | | Activity Leader | Approved Budget | Cumulative Completion | Planned Completion | | Cumulative Progress and Deliverables up-to-date |
|---|------------|--|-----------------|-----------------|---|--------------------|------|---|
| Outcome | Activity # | Activity | | | | Month | Year | |
| 2.1 Ensured capacity, availability and quality of laboratory testing in country needed to support the diagnosis and monitoring of TB patients | 2.1.1 | Strengthen laboratory services and systems through training in LED microscopy | FHI 360 | 70,387 |  100% | May | 2012 | 43 laboratory staff (12 female, 31 male) were trained in LED microscopy from all target provinces in three trainings held from April 23-27, May 7-11 and May 14-18, 2012. With available savings, another training is planned from September 3-6, 2012. |
| | 2.1.2 | Support the implementation of the National Courier System for the referral of TB specimens | FHI 360 | 92,971 |  50% | Sept | 2012 | An action plan has been developed by the National Reference Laboratory staff with TB CARE I staff and support by the MSH regional advisor, Dr. Grace Kahenya. A baseline assessment of the TB specimen referral system will be conducted from July 23 to August 13, 2012 in four selected provinces (Copperbelt, Central, Northern and Eastern provinces). A questionnaire for the baseline has been developed. |
| | 2.1.3 | Support external quality assessment (EQA) implementation | FHI 360 | 136,756 |  75% | Sept | 2012 | TB CARE I continued supporting EQA implementation to 112 facilities including health center level diagnostic facilities in the five supported provinces. These include 68 health centers and 44 district laboratories. |
| | 2.1.4 | Conduct follow up visits after EQA implementation | FHI 360 | 55,764 |  50% | Sept | 2012 | Follow-up visits for EQA feedback & corrective action were not done this quarter because major errors were not identified. |
| | 2.1.5 | Develop Culture EQA | MSH | 26,589 |  25% | Sept | 2012 | Orientation training for clinicians, TB focal persons and laboratory staff is planned for September 2012. |
| | 2.1.6 | Strengthen laboratory staff biosafety skills | FHI 360 | 34,027 |  75% | Jun | 2012 | 15 laboratory staff (3 female) were trained in biosafety and biosecurity in June 2012. 15 more laboratory staff will be trained in biosafety and biosecurity in the next quarter. |






| | | | | | | | | |
|--|-------------------|---|------------------------|------------------------|--|--------------|-------------|--|
| | 2.1.7 | Support smear preparation at non-diagnostic sites | FHI 360 | |  25% | Sept | 2012 | The training of health care workers from none TB diagnostic sites, in smear preparation and fixation will be conducted from September 10-14, 2012. |
| Outcome | Activity # | Activity | Activity Leader | Approved Budget | Cumulative Completion | Month | Year | Cumulative Progress and Deliverables up-to-date |
| 2.2 Ensured the availability and quality of technical assistance and services | 2.2.1 | Provide national and provincial level technical support | KNCV | 106,858 |  50% | Sep | 2012 | Communication going on with Chest Diseases Laboratory to have the activity in September 2012 and Dr. Valentina Anisimova will provide technical support. |
| | 2.2.2 | Build capacity for laboratory staff from culture facilities | FHI 360 | 91,981 |  50% | Sep | 2012 | An action plan has been developed following discussions held with the reference laboratories for implementation in the next quarter. Training to be conducted in September 18 - 22, 2012, in TB laboratory management. |
| | 2.2.3 | Equip laboratory staff with skills in new diagnostics | FHI 360 | 48,228 |  100% | March | 2012 | Activity completed last quarter. |
| | 2.2.4 | Support national laboratory meeting | FHI 360 | 39,308 |  50% | Sep | 2012 | The meeting has been planned for September 2012. |
| Outcome | Activity # | Activity | Activity Leader | Approved Budget | Cumulative Completion | Month | Year | Cumulative Progress and Deliverables up-to-date |
| 2.3 Ensured optimal use of new approaches to the laboratory confirmation of TB and incorporation in national strategic lab plans | 2.3.1 | Procure diagnostic equipment | FHI 360 | 85,867 |  100% | June | 2012 | The two GeneXpert instruments procured last quarter were delivered to TB CARE I offices and the project is waiting for further guidance on installation of the machines in the selected facilities. A national task force will provide this guidance and meetings are planned for July 2012. |
| | 2.3.2 | Procure lab supplies | FHI 360 | 50,561 |  100% | Apr | 2012 | Activity completed last quarter. |
| | | | | |  65% | | | |





| 3. Infection Control | | | Activity Leader | Approved Budget | Cumulative Completion | Planned Completion | | Cumulative Progress and Deliverables up-to-date |
|--|------------|--|-----------------|-----------------|---|--------------------|------|--|
| Outcome | Activity # | Activity | | | | Month | Year | |
| 3.2 Scaled-up implementation of TB-IC strategies | 3.2.1 | Incorporate TB IC into health facility general infection control plans | FHI 360 | 24,161 |  75% | Sept. | 2012 | TB CARE I has supported the integration of TB IC in 8 facilities out of the 10 targeted for year 2 . |
| | 3.2.2 | Enhance safe TB IC work practices in MDR-TB treatment sites | FHI 360 | 22,133 |  75% | June | 2012 | 2 KNCV Consultants, Dr. Victor Ombeka and Dr. Amos Kutwa provided technical assistance on PMDT in-country in May, 2012. TB CARE I is waiting for NTP guidance on this activity, especially for data collection on MDR-TB patients. Dr. Ombeka will provide more TA in September 2012 |
| | 3.2.3 | Enhance the use of available space to maximize TB IC measures | FHI 360 | 50,000 |  75% | Sept. | 2012 | Five facilities identified for renovation support were assessed in the second quarter. Tender procedures were underway for the sites, following outlined guidelines. The facilities include the national reference laboratory incinerator housing, three laboratory facilities in the Copperbelt Province (Bulangililo health center in Kitwe, Chawama Health Centre and Nchanga North Hospital in Chingola), the outpatient department and male ward of Kabwe General Hospital. |
| | 3.2.4 | Provide technical assistance in TB IC at facility level | KNCV | 20,475 |  50% | Sept. | 2012 | A review-mission of the Ndola district TB IC demonstration project is planned in December 2012, as agreed upon with |
| Outcome | Activity # | Activity | Activity Leader | Approved Budget | Cumulative Completion | Month | Year | Cumulative Progress and Deliverables up-to-date |
| 3.4 Improved TB-IC human resources | 3.4.1 | Build provincial level staff capacity in TB IC through regional training | FHI 360 | 29,552 |  75% | Jul | 2012 | 2 MOH staff (1 female, 1 male) were trained in TB Infection Control in Pretoria, South Africa. TB CARE I will support another training in PMDT in Rwanda from July 23-27,2012 during quarter 4. |
| | 3.4.2 | Enhance provincial level staff capacity in TB IC through local training | KNCV | 4,450 |  50% | June | 2012 | The training is planned to take place in the fourth quarter of project implementation and planning is underway to include laboratory staff. |
| | | | | |  67% | | | |




| 4. PMDT | | | Activity Leader | Approved Budget | Cumulative Completion | Planned Completion | | Cumulative Progress and Deliverables up-to-date |
|---------------------------------------|------------|---|-----------------|-----------------|--|--------------------|------|--|
| Outcome | Activity # | Activity | | | | Month | Year | |
| 4.1 Improved treatment success of MDR | 4.1.1 | Rehabilitate infrastructure for management of multi-drug resistant (MDR-TB) TB patients | FHI 360 | 623,382 |  50% | Sept. | 2012 | The MoH infrastructure unit has provided guidance on the tender process that is underway for selection of a contractor for the construction works at UTH and Kabwe General Hospital. The MoH infrastructure unit will also oversee the renovation works that are expected to commence from the next quarter. |
| | 4.1.2 | Provide technical assistance in MDR-TB facilities on TB IC | KNCV | 43,626 |  50% | Sept. | 2012 | Dr. Victor Ombeka and Dr. Amos Kutwa provided technical support from May 20 to June 1, 2012. Further support is planned for September 2012 |
| | 4.1.3 | Procure personal protective equipment | FHI 360 | 8,100 |  100% | March | 2012 | Activity complete. Respirators were procured this quarter. |
| | | | | |  67% | | | |





| 5. TB/HIV | | | Activity Leader | Approved Budget | Cumulative Completion | Planned Completion | | Cumulative Progress and Deliverables up-to-date |
|---|------------|---|-----------------|-----------------|---|--------------------|------|---|
| Outcome | Activity # | Activity | | | | Month | Year | |
| 5.2 Improved diagnosis of TB/HIV co-infection | 5.2.1 | Strengthen district and health facility level TB/HIV coordinating bodies | FHI 360 | 98,982 |  75% | Sept. | 2012 | TB CARE I provided support to three District TB/HIV meetings held in Kitwe on the Copperbelt province, Kasama and Mungwi in the Northern province. TB CARE I is planning to support more meetings in Mufulira, Ndola and Kitwe in the next quarter. |
| | 5.2.2 | Enhance health care worker involvement in community TB and HIV services | WHO | 99,440 |  75% | Sept. | 2012 | Trainings conducted for Copperbelt, North Western and Luapula provinces |
| | 5.2.3 | Enhance community involvement in TB case finding efforts among HIV infected persons | FHI 360 | 61,754 |  50% | Sept. | 2012 | 22 community health workers were trained in Northern province from April 9-13, 2012 (10 females, 12 males). More trainings are planned for the Central, Luapula and North Western provinces in the fourth quarter. |

| | | | | | | | | |
|--|--------------|---|---------|--------|--|-------|------|---|
| | 5.2.4 | Intensify TB screening in HIV prevention, care and treatment points | FHI 360 | 5,261 |  75% | Sept. | 2012 | The activity will be conducted from July 9-13, 2012 in Kapiri Mposhi, Central province in partnership with the PEPFAR funded Corridors of Hope (COH III) project. |
| | 5.2.5 | Training in provider initiated HIV counseling and testing | FHI 360 | 38,902 |  100% | March | 2012 | Activity completed. Three more trainings will be conducted with savings from the budget because of demand from the provinces including Central, Luapula, and North Western provinces. |
| | 5.2.6 | Procure facility equipment for renovated TB clinic | FHI 360 | 8,962 |  100% | March | 2012 | Activity completed. |
| | | | | |  79% | | | |

| 6. Health Systems Strengthening | | | Activity Leader | Approved Budget | Cumulative Completion | Planned Completion | | Cumulative Progress and Deliverables up-to-date |
|--|-------------------|---|------------------------|------------------------|--|---------------------------|-------------|--|
| Outcome | Activity # | Activity | | | | Month | Year | |
| 6.2 TB control components (drug supply and management, laboratories, community care, HRD and M&E) formed integral part of national plans, strategies and service | 6.2.1 | Support World TB Day commemoration | WHO | 11,300 |  100% | March | 2012 | Activity completed |
| | 6.2.2 | Strengthen human capacity efforts in TB control | FHI 360 | 27,854 |  50% | Sept. | 2012 | TB CARE I will participate in the Union conference in November 2012. The abstract on laboratory support was accepted. Three TB CARE I staff members began registration procedures. |
| | 6.2.3 | Strengthen staff knowledge in required rules and regulation | FHI 360 | 40,104 |  100% | Mar | 2012 | Activity completed |
| | 6.2.4 | Participate in provincial planning | FHI 360 | 10,944 |  100% | Sept. | 2012 | Joint planning meeting was held from June 28-29, 2012 with NTP, CDL, TB CARE I partners and PMO representatives including TB and laboratory focal persons. |
| | | | | |  88% | | | |

| 7. M&E, OR and Surveillance | | | Activity Leader | Approved Budget | Cumulative Completion | Planned Completion | | Cumulative Progress and Deliverables up-to-date |
|--|------------|--|-----------------|-----------------|--|--------------------|------|---|
| Outcome | Activity # | Activity | | | | Month | Year | |
| 7.1 Strengthened TB surveillance | 7.1.1 | Strengthen provincial data quality through provincial technical review meetings | WHO | 169,500 |  75% | Sept. | 2012 | Provincial technical review meetings conducted for Central, North Western, Luapula and Copperbelt provinces. Northern province meeting scheduled for next quarter |
| | 7.1.2 | Strengthen monitoring and evaluation through national, provincial, and district supervisory visits | WHO | 56,500 |  50% | Sept. | 2012 | National level supervisory visits conducted in all the 5 provinces: Copperbelt, Central, North Western, Luapula and Northern provinces |
| | 7.1.3 | Support availability of national key strategic documents for TB control | WHO | 22,600 |  75% | June | 2012 | Printing of MDR-TB tools started in June 2012. TB manual due for printing in quarter 4 |
| Outcome | Activity # | Activity | Activity Leader | Approved Budget | Cumulative Completion | Month | Year | Cumulative Progress and Deliverables up-to-date |
| 7.2 Improved capacity of NTPs to analyze and use quality data for management of the TB program | 7.2.1 | Strengthen national data quality through annual national review meeting | FHI 360 | 38,970 |  100% | March. | 2012 | Activity completed. TB CARE I supported the annual TB/HIV/Leprosy technical and data review meeting in May 2012. |

| Outcome | Activity # | Activity | Activity Leader | Approved Budget | Cumulative Completion | Month | Year | Cumulative Progress and Deliverables up-to-date |
|---|--------------|--|-----------------|-----------------|--|-------|------|--|
| 7.3 Improved capacity of NTPs to perform operational research | 7.3.1 | Conduct operations research | FHI 360 | 212,769 |  50% | Sept. | 2012 | A start up national level training on operational research was conducted from April 17-20, 2012. Agreement has been made to conduct a second workshop on protocol development from August 20-24, 2012. The NTP is providing guidance on involvement of researchers and a way forward with OR implementation. |
| | 7.3.2 | Provide technical assistance in implementation of operational research | FHI 360 | 11,938 |  75% | Sept. | 2012 | A Senior Research Advisor has been hired under FHI360 who will also support implementation of OR under TB CARE I. Emails and conference calls have been held with NTP, consultants from FHI360 and KNCV during planning for a second workshop in August, 2012. |
| | | | | |  71% | | | |

| 8. Drug supply and management | | | | Planned Completion | | | | |
|--|--------------|--|-----------------|--------------------|--|-------|------|---|
| Outcome | Activity # | Activity | Activity Leader | Approved Budget | Cumulative Completion | Month | Year | Cumulative Progress and Deliverables up-to-date |
| 8.1 Ensured nationwide systems for a sustainable supply of anti-TB drugs | 8.1.1 | Provide technical assistance to the NTP in drug management | KNCV | 19,748 |  100% | Sept. | 2012 | Activity completed. Dr. Remi Verduin came on a GDF mission this quarter supported by TBCARE I in May 2012. |
| | 8.1.2 | Procure first-line drugs | FHI 360 | 1,000,000 |  25% | Sept. | 2012 | Funds were reprogrammed for other NTP activities agreed upon with TB CARE I and the mission. A new workplan was advised and is being prepared in July 2012. |
| | | | | |  63% | | | |
| | | | | |  65% | | | |

Quarterly MDR-TB Report

| | |
|---------|--------|
| Country | Zambia |
|---------|--------|

| | |
|--------|-----------------|
| Period | April-June 2012 |
|--------|-----------------|

MDR TB cases diagnosed and put on treatment in country

| Quarter | Number of MDR cases diagnosed | Number of MDR cases put on treatment |
|-----------------|-------------------------------|--------------------------------------|
| Jan-Dec 2010 | | |
| Jan-Sep 2011 | | |
| Oct-Dec 2011 | | |
| Total 2011 | 0 | 0 |
| Jan-Mar 2012 | | |
| Apr-Jun 2012 | | |
| To date in 2012 | 0 | 0 |

Reporting tools for MDRTB have been developed. TB CARE I and NTP will conduct a data reconstruction process to determine the number of MDR TB patients who started treatment in the cohort.

Quarterly GeneXpert Report

| | | | |
|---------|--------|--------|-----------------|
| Country | Zambia | Period | April-June 2012 |
|---------|--------|--------|-----------------|

Table 1: GeneXpert instruments and cartridges procured or planned by quarter

| | Procured | | | # still planned for procurement in APA 2 | Month, Year procurement planned (i.e. April 2012) |
|-------------------------|--------------|--------------|------------------|--|---|
| | Jan-Dec 2011 | Jan-Jun 2012 | Cumulative total | | |
| # GeneXpert Instruments | 1 | 2 | 3 | 0 | |
| # Cartridges | 400 | 560 | 960 | 0 | |

Table 2: Cumulative List of GeneXpert Instruments Procured to Date or Planned in the Next Quarter

| Already procured or still planned? (i.e. Write "Procured" or "Planned") | Instrument | # of Modules (1, 2, 4, or 16) | Location(s) (facility name & city/ province or TBD) | USG Funding Source (e.g., PEPFAR COP FYxx, USAID) ¹ | Partner/ Implementing Organization; Additional Comments |
|---|------------|-------------------------------|---|--|--|
| Procured | 1 | 4 | National Reference | USAID | TBCARE I procured for NTP. After evaluation, the final site will be selected |
| Procured | 2 | 4 | Lubuto Health Center in Ndola, Copperbelt Province | USAID | To be placed at point of care laboratories in Copperbelt province |
| Procured | 3 | 4 | Kapiri Mposhi District Hospital in Kapiri, Central | USAID | To be placed at point of care laboratories in Central provinces |
| | 4 | | | | |
| | 5 | | | | |
| | 6 | | | | |
| | 7 | | | | |
| | 8 | | | | |

¹ Differentiating between PEPFAR and USAID-funded is important. If it is PEPFAR funded, specify the fiscal year (i.e. FY2011). Add rows if there are more than 8 instruments in total.

Table 3: Cumulative Xpert MTB/RIF Cartridges Procured to Date or Planned for Next Quarter

| Already procured or still planned? (i.e. Write "Procured" or "Planned") | Order # | # of Cartridges* | Location(s) (facility name and city/ province or TBD) | USG Funding Source (e.g., PEPFAR COP FYxx, USAID) ¹ | Comments |
|---|---------|------------------|---|--|----------|
| Procured | 1 | 400 | National Reference Laboratory, Lusaka | USAID | |
| Planned | 2 | 410 | Lubuto Health Center in Ndola, Copperbelt Province | USAID | |
| Planned | 3 | 150 | Kapiri Mposhi District Hospital in Kapiri, Central Province | USAID | |
| | 4 | | | | |
| | 5 | | | | |

*There are 10 cartridges per kit, but we need the total # of **cartridges** (not kits)
Add an additional row for every procurement order of cartridges

Any additional information/clarifications to the above (optional)

Please provide a brief description of any significant problems encountered in use of the GeneXpert machine(s) and Xpert MTB/RIF cartridges

Please describe technical assistance or evaluation of implementation activities performed and planned.

Quarterly Photos



19 female and 11 male participants and some facilitators at the Kabwe District TB DOTS training held from May 6-12, 2012 in Kabwe, Central province.



MoH laboratory staff performing a practical exercise during LED training



Participants from all nine administrative provinces attending the operations research workshop in Kabwe from April 17-



TB CARE I staff members with KNCV PMDT consultants on their last day of the PMDT mission

Inventory List of Equipment - TB CARE I

| | |
|--------------------------|------------------------|
| Organization: | TB CARE I |
| Country: | Zambia |
| Reporting period: | April-June 2012 |
| Year: | APA 2 |



USAID
FROM THE AMERICAN PEOPLE

TB CARE I

| Description (1) | ID numbers (2) | Acquisition date (3) | Acquisition cost (4) | V.A.T (5) | Location (6) | Condition (7) | Disposition date (8) | Title held by (9) | Insurance Policy # |
|----------------------------|----------------------------|----------------------|----------------------|-----------|------------------------------|---------------|----------------------|-------------------|-----------------------|
| GENE XPRT MACHINE | 801639 | February 10, 2012 | \$23,191.70 | | CDL LUSAKA | Good | | FHI360 | P/01/1014/045922/2011 |
| GENE XPRT MACHINE | 801638 | February 10, 2012 | \$23,191.70 | | LUSAKA | Good | | FHI360 | P/01/1014/045922/2011 |
| EXAMINATION COUCH | FHI/TBCL ME 029 | March 29, 2012 | \$353.16 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| EXAMINATION COUCH | FHI/TBCL ME 030 | March 29, 2012 | \$353.16 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| EXAMINATION COUCH | FHI/TBCL ME 031 | March 29, 2012 | \$353.16 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| EXAMINATION COUCH | FHI/TBCL ME 032 | March 29, 2012 | \$353.16 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| EXAMINATION COUCH | FHI/TBCL ME 033 | March 29, 2012 | \$353.16 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| XRAY VIEWING BOX | FHI/TBCL ME 034 | March 29, 2012 | \$139.41 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| XRAY VIEWING BOX | FHI/TBCL ME 035 | March 29, 2012 | \$139.41 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| XRAY VIEWING BOX | FHI/TBCL ME 036 | March 29, 2012 | \$139.41 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| XRAY VIEWING BOX | FHI/TBCL ME 037 | March 29, 2012 | \$139.41 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| XRAY VIEWING BOX | FHI/TBCL ME 038 | March 29, 2012 | \$139.41 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| BEDSIDE SCREENS | FHI/TBCL ME 039 | March 29, 2012 | \$176.58 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| BEDSIDE SCREENS | FHI/TBCL ME 040 | March 29, 2012 | \$176.58 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| BEDSIDE SCREENS | FHI/TBCL ME 041 | March 29, 2012 | \$176.58 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| BEDSIDE SCREENS | FHI/TBCL ME 042 | March 29, 2012 | \$176.58 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| BEDSIDE SCREENS | FHI/TBCL ME 043 | March 29, 2012 | \$176.58 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/045922/2011 |
| DELL LATITUDE E6320 Laptop | FX18BS1 | April 10, 2012 | \$1,857.31 | | Ndola Office | Good | | FHI360 | P/01/1007/045858/2011 |
| DELL LATITUDE E6320 Laptop | 4GS8BS1 | April 10, 2012 | \$1,857.31 | | Ndola Office | Good | | FHI360 | P/01/1007/045858/2011 |
| DELL LATITUDE E6320 Laptop | 7GS8BS1 | April 10, 2012 | \$1,857.31 | | LUSAKA | Good | | FHI360 | P/01/1007/045858/2011 |
| DELL LATITUDE E6320 Laptop | 9Y18BS1 | April 10, 2012 | \$1,857.31 | | LUSAKA | Good | | FHI360 | P/01/1007/045858/2011 |
| HP LASERJET M3035MFP | CNRTCH096 | April 10, 2012 | \$2,839.11 | | LUSAKA | Good | | FHI360 | P/01/1007/045858/2011 |
| LCD PROJECTOR | EYJBU01001112002 D5592B | April 10, 2012 | \$656.25 | | LUSAKA | Good | | FHI360 | P/01/1007/045858/2011 |
| BOOK SHELVES | FHI/TBCL OF 094 | April 24, 2012 | \$200.78 | | Ndola Office | Good | | FHI360 | P/01/1014/046772/2011 |

| | | | | | | | | | |
|-----------------|-----------------|----------------|----------|--|------------------------------|------|--|--------|-----------------------|
| BOOK SHELVES | FHI/TBCL OF 095 | April 24, 2012 | \$200.78 | | Ndola Office | Good | | FHI360 | P/01/1014/046772/2011 |
| BOOK SHELVES | FHI/TBCL OF 096 | April 24, 2012 | \$200.78 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| BOOK SHELVES | FHI/TBCL OF 097 | April 24, 2012 | \$200.78 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| WAITING BENCHES | FHI/TBCL OF 098 | April 24, 2012 | \$105.17 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| WAITING BENCHES | FHI/TBCL OF 099 | April 24, 2012 | \$105.17 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| WAITING BENCHES | FHI/TBCL OF 100 | April 24, 2012 | \$105.17 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| WAITING BENCHES | FHI/TBCL OF 101 | April 24, 2012 | \$105.17 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 056 | May 3, 2012 | \$448.36 | | LUSAKA | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 057 | May 3, 2012 | \$442.61 | | LUSAKA | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 058 | May 3, 2012 | \$442.61 | | LUSAKA | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 059 | May 3, 2012 | \$277.27 | | LUSAKA | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 060 | May 3, 2012 | \$277.27 | | LUSAKA | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 061 | May 3, 2012 | \$277.27 | | LUSAKA | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 062 | May 3, 2012 | \$277.27 | | LUSAKA | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 063 | May 3, 2012 | \$277.27 | | Ndola Office | Good | | FHI360 | P/01/1014/046772/2011 |
| OFFICE DESK | FHI/TBCL OF 064 | May 3, 2012 | \$277.27 | | Ndola Office | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 065 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 066 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 067 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 068 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 069 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 070 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 071 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 072 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 073 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 074 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 075 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 076 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 077 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 078 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | | FHI360 | P/01/1014/046772/2011 |

| | | | | | | | | |
|---------------------|-----------------|--------------|-------------|--|------------------------------|------|--------|-----------------------|
| VISITORS CHAIR | FHI/TBCL OF 079 | May 3, 2012 | \$156.60 | | NDOLA - Chest Disease Clinic | Good | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 080 | May 3, 2012 | \$156.60 | | Ndola Office | Good | FHI360 | P/01/1014/046772/2011 |
| VISITORS CHAIR | FHI/TBCL OF 081 | May 3, 2012 | \$156.60 | | Ndola Office | Good | FHI360 | P/01/1014/046772/2011 |
| SWIVEL CHAIR | FHI/TBCL OF 082 | May 3, 2012 | \$197.82 | | Ndola Office | Good | FHI360 | P/01/1014/046772/2011 |
| SWIVEL CHAIR | FHI/TBCL OF 083 | May 3, 2012 | \$197.82 | | Ndola Office | Good | FHI360 | P/01/1014/046772/2011 |
| SWIVEL CHAIR | FHI/TBCL OF 084 | May 3, 2012 | \$197.82 | | LUSAKA | Good | FHI360 | P/01/1014/046772/2011 |
| SWIVEL CHAIR | FHI/TBCL OF 085 | May 3, 2012 | \$197.82 | | LUSAKA | Good | FHI360 | P/01/1014/046772/2011 |
| SWIVEL CHAIR | FHI/TBCL OF 086 | May 3, 2012 | \$197.82 | | LUSAKA | Good | FHI360 | P/01/1014/046772/2011 |
| SWIVEL CHAIR | FHI/TBCL OF 087 | May 3, 2012 | \$197.82 | | LUSAKA | Good | FHI360 | P/01/1014/046772/2011 |
| SWIVEL CHAIR | FHI/TBCL OF 088 | May 3, 2012 | \$197.82 | | LUSAKA | Good | FHI360 | P/01/1014/046772/2011 |
| LOCKABLE CABINET | FHI/TBCL OF 089 | May 3, 2012 | \$362.66 | | Ndola Office | Good | FHI360 | P/01/1014/046772/2011 |
| LOCKABLE CABINET | FHI/TBCL OF 090 | May 3, 2012 | \$362.66 | | Ndola Office | Good | FHI360 | P/01/1014/046772/2011 |
| LOCKABLE CABINET | FHI/TBCL OF 091 | May 3, 2012 | \$362.66 | | LUSAKA | Good | FHI360 | P/01/1014/046772/2011 |
| LANDCRUISER HARDTOP | 1HZ-0685650 | May 11, 2012 | \$45,985.15 | | LUSAKA | Good | FHI360 | 3031120005175 |
| LANDCRUISER HARDTOP | 1HZ-0685909 | May 11, 2012 | \$45,985.15 | | Ndola | Good | FHI360 | 3031120005175 |
| | | | | | | | | |

- (1) Description of equipment: transportation (vehicles), administration (computers, faxes), laboratory equipment or others
- (2) Identification number (eg Manufacturer's serial number, model number, Federal stock number, national stock number)
- (3) Date of invoice
- (4) Total price including any sales tax paid. Use currency on invoice
- (5) Note any sales tax charged
- (6) Address
- (7) Good/fair or bad
- (8)+(9) Ultimate disposition data, (in the case of a vehicle) including date of disposal and sales price or the method used to determine current fair market value. where a recipient compensated TB CARE I for its share. Attach supplementary info